PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

RMINATION RECORD X2 007 000 2/por 2

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			7		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		ľ	RATE	FEE		RATE	FEE
FOR) NUMBER FILED		NUMBI	BER EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			7 minus 20=		• 0			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS				nus 3 =	* (Ô _		X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT					a foodules			+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column							Ę	TOTAL		OR	TOTAL	740
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 17	Minus	**	20	=		X\$ 9=		OR	X\$18=	
	Independent	* 3	Minus	***	3	= /		X42=		OR	X84=	
	A CONTRACTOR OF THE PARTY OF TH	NTATION OF M	JLTIPLE DEF	ENDEN	IT CLAIM			+140=			+280=	
B-same.								+140= TOTAL	wante of the same	OR	TOTAL	- And a specific Co.
								ADDIT. FEE		OR	ADDIT. FEE	And the second second second second
Titara mi		(Column 1) CLAIMS	1		ımn 2) HEST	(Column 3) T			ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	MBER HOUSLY D FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	:
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESENTATION OF MOLTIPLE DEPENDENT CLAIM							+140=		OR	+280=	
Rest Available Copy								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			umn 2)	(Column 3)		ADDII. FEE		•	ADDII. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	s .	HIG NUI PREV	HEST MBER YOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									On .		
+140= OR +280= * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

NOTICE OF FEE DUE

DATE: 10-01-03	_ l'priecle dl
TO: RCF	
FROM: Office of Initial Patent Examina	ation () dags
SUBJECT: Fee Due	1011/1/3
APPLICATION NUMBER: _///	67,324
A fee is due for the attached document subm Office for the following reason. Please chec authorization to charge a deposit account. If charge the appropriate fee. If an authorization the fee deficiency.	ck the application for the appropriate f an authorization is present, please
Insufficient fee by check	
☐ Insufficient funds in deposit account	
□ Declined credit card	
☐ Non authorization for charge to deposit a	ccount
□ No fee submitted per requirement *	•
The correct fee code: $\frac{120}{120}$	amount \$
The suspended fee code: 19 99	amount - \$.750
Fee Due	amount =\$
f you have any questions, please contact Cyr Eleanor Kurtz at 703-308-3642.	nthia Streater at 703-306-5430 or
Terminal Operator	
•	•